

O.C.H.U.

Monthly Per Capita Form

ISSUED BY: O.C.H.U. Secretary-Treasurer

TO: THE TREASURER OF CUPE LOCAL _____

To be returned to the O.C.H.U. Secretary-Treasurer with the cheque for per capita tax payment. This form can also be downloaded and completed digitally: go to <https://ochu.on.ca/resources-for-locals/>. Please retain a copy for your records and return the original to admin@ochu.on.ca, or with cheque to:

OCHU/CUPE
261 Gerrard St East
Toronto ON, M5A 2G1

The following must be completed by the local union

Treasurer: Date this report sent: _____

For the month of: _____

Per Capita rates effective October 1, 2024

Description	NUMBER OF MEMBERS	PER CAPITA*	TOTAL
FULL TIME (30 hrs plus per month)		X	
PART TIME (30 hours plus per month)		X	
CASUAL (under 30 hrs per month)		X	
TOTAL			

*As per OCHU Bylaw 6.1 and 6.2, the per capita rate has changed to reflect the percentage wage increase negotiated centrally.

CERTIFIED CORRECT:

(Signature of Local Treasurer)

Treasurer Address: Name: _____
Address: _____
City: _____ Province: _____
Local: _____ Postal Code: _____
Phone Numbers: Home: _____
Work: _____
Email: _____